



DOMINION

ACADEMY OF DAYTON

Certified Transcript Request Form

Please submit completed form to the Office Administrator. Please note, this form is for CERTIFIED transcript copies only. Electronic and non-certified copies are free. For an electronic copy, please e-mail registrar@dominionacademy.org.

Date: _____

Student's Full Name (please print): _____ Date of Birth: _____

Certified Copies of Transcripts are \$5.00 each. Please allow one week for mailing of transcripts.

Number of official transcripts requested: _____ x \$5.00 = _____ Total Fee

Parent's/Guardian's Name: _____

Parent's/Guardian's Signature: _____ Date: _____

Please provide complete mailing information below for each institution. Additional sheets may be attached:

1. _____

2. _____

3. _____

4. _____

<i>Office Use Only:</i>	
<input type="checkbox"/>	Paid _____
<input type="checkbox"/>	Printed & sealed _____
<input type="checkbox"/>	Mailed or picked up _____